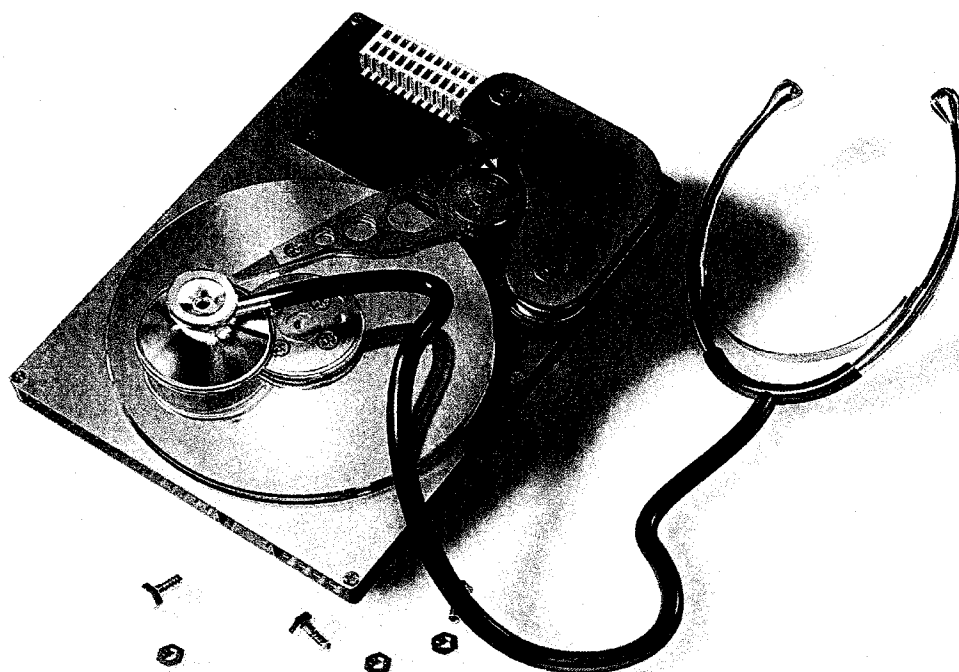# Montana HIT
(Health Information Technology)
Task Force

2007 Montana Legislature
Information Packet
February 8, 2007

Introduction

The Montana HIT Task Force, a grass-roots coalition of healthcare providers, state and federal agencies, consumers and other stakeholders, seeks the partnership of the State of Montana in its endeavor to promote the use of electronic health information technology throughout the state. Montanans, as patients and taxpayers, should be confident that vital healthcare information is available to patients and their physicians and other providers, whenever and wherever health care is needed, in a private and secure system. Such a system holds the promise of enormously improving healthcare quality, safety, and efficiency. The Task Force is committed to coordinating with the state, as well as with federal initiatives, to promote the electronic exchange of health information. The Task Force humbly requests the Montana Legislature and Executive Branch to become partners in this exciting and highly beneficial project.

Development

Consensus has emerged within federal leadership and the public and private sectors that Health Information Technology (HIT) and Health Information Exchange (HIE) when implemented properly can improve the quality and safety of health care and help stem its rising costs. Consistent with Health and Human Services Secretary Leavitt's maxim of "national standards; neighborhood solutions," state and local governments are beginning to collaborate and develop a consensus among diverse stakeholders on the vision, goals, and strategies required to foster improved health care and outcomes through timely and appropriate health care information exchange.

The Montana HIT Task Force is an organization of healthcare providers and stakeholders brought together with the assistance of U.S. Senator Max Baucus as a result of his desire to improve healthcare for Montanans. These representatives and stakeholders met in January, March, May, and October of 2006 and in January 2007. The meetings were held at several locations around Montana, and participants attended in person, and via phone and videoconference. Thirty-three stakeholders were represented. Categories of stakeholders ranged from health-care providers and health-care facilities to payers, state government, physician and hospital associations, and representatives of the Office of Rural Health and Montana educational institutions.

Issue-specific groups titled governance, finance, technology, physician champions and legislative have formed from volunteers and as a result of the work of these groups, an organizational resolution and a Steering Committee were approved at the January 19, 2007 meeting. The Steering Committee will be tasked with maintaining and refreshing the vision, strategy, and outcome metrics underpinning the project. It will also provide advocacy when needed and build trust, buy-in and participation of major stakeholders statewide. Additionally, the Steering Committee will work to assure equitable and ethical approaches in implementing HIT/HIE in Montana. It may also raise, receive, manage,

and distribute state, federal, or private funds. It will prioritize and foster interoperability for statewide and regional projects.

Purpose

The mission of the Task Force is to support, promote, and encourage the exchange of secure and reliable health information among stakeholders and regional networks to improve the safety, quality, and efficiency of healthcare through the adoption of electronic health records along with other forms of health information technology.

The vision is to develop a framework that allows for the efficient electronic universal exchange of patient-centric and secure health records to improve healthcare quality and patient safety.

Purpose and Powers of the Steering Committee

Officers: At the first meeting of the Steering Committee, which shall be called by a representative of Mountain-Pacific Quality Health after consultation with the members of the Steering Committee, the Steering Committee shall elect officers, including a Chair and Vice-Chair and other officers as it determines are useful.

Elected Officers:
Chair: Dwight Hiesterman, Clinical Consultant, Mountain-Pacific Quality Health
Vice-Chair: Kristin Juliar, Director – Montana Office of Rural Health
Secretary: Greg Drapes, CEO – Monida Healthcare Network
Treasurer: Keith Wolcott, CEO – Statewide Healthcare Coalition

Executive Committee: Will be composed of the above elected officers and the chairperson of the legislative, technical, and physician champion workgroups.

Workgroups: The Steering Committee directs that the current workgroups continue with their present membership and ongoing projects. These workgroups are:
Finance
Governance
Legislative
Physician Champions
Technology

Recommendation to the Legislature

Based on the recommendations of the Montana Health Information Technology Task Force and Steering Committee, the following recommendations are made to the 2007 Montana Legislature:

Priorities of the Montana Health Information Technology Task Force

☐ <u>Interoperable Electronic Health Records Adoption</u> in rural and underserved areas should be supported so that small primary care clinics, rural hospitals, local health departments, community health centers, and other healthcare providers can acquire health information technology to improve the quality and safety of care and to securely exchange health information

☐ <u>Technical Assistance and Evaluation</u> to assist small and medium physicians offices has been developed in a program called Doctors' Office Quality – Information Technology (DOQ-IT). DOQ-IT could be implemented across Montana to:
   o Select and implement electronic health record solutions that are cost effective, ensure privacy, and meet accepted IT standards
   o Assist physician offices to implement electronic health records with a focus on improved clinical outcomes and achieving quality indicators

☐ <u>Personal Health Records</u> allow patients to keep their own health records to share with physicians and providers to improve quality, reduce duplication of tests, and allow access to faster, safer treatment and care in emergencies.

☐ <u>Continuity of Care Records</u> are a system of collecting a core data set of the most relevant and timely facts about a patient's health record. With the patient's permission, this information is used to assure a smooth transfer of information as people are referred to other physicians or seek emergency care.

☐ <u>Health Information Exchange</u> is the technological system that allows community and regional consortia of physician practices, hospitals and other healthcare providers to transfer patient information such as lab results, imaging, prescriptions and continuity of care records. HIE will improve continuity and quality of care and will reduce costs and patient discomfort through fewer duplicative tests.

☐ <u>Infrastructure to Plan, Manage, and Implement the Recommendations</u> will engage the physician, rural hospitals, public health, community health centers, long-term care and federal healthcare providers in assuring a systematic and cost effective implementation of the priorities. Connecting to national standards and developments will ensure that Montana can interact with healthcare providers nationally, and gain access to the best and most appropriate technology for the state.

Benefits of HIT to Consumers, Clinicians, Communities and the State

Healthcare Consumers – Electronic Health Records
- Consumers save money and worry because there is no need to fill out lengthy forms or explain their health history (and possibly forget something important) every time they see a healthcare provider.
- Healthcare is safer and quality is higher because healthcare providers will have the right information to help make better decisions.
- Patient information is accessible so consumers won't need to bring their medical records to doctor appointments.

Healthcare Consumers – Personal Health Records
- Consumers can keep a secure, convenient, accessible record of their own health information.
- Consumers taking care of children or elderly family members have access to the information needed to help their family member.
- Consumers can monitor their health and set reminders of appointments and tests.

Communities
- The healthcare infrastructure of a community is better able to link to health systems in other communities, strengthening quality and access to care.
- In a community health emergency, citizens can have confidence that providers can communicate and respond quickly.

State
- As a major purchaser of healthcare, the state can have confidence that healthcare providers are implementing systems proven to improve quality and reduce cost.

Summation

Participants of the HIT Task Force have consistently expressed strong support to increase the priority and visibility of HIT and HIE within the state of Montana. The Task Force is committed to developing a shared vision for the adoption of HIT and interoperability in Montana, and to draft a set of key principles and high-level actions for a statewide electronic health information strategy. A roadmap will be constructed with an acknowledgement of other activities currently planned in Montana including HIE efforts in regional areas and statewide initiatives underway through the Montana Department of Public Health and Human Services and implementations by providers in Montana. The roadmap will articulate a path to ensure that the needs of rural communities and small physician practices are accommodated.

There is no single method to undertake such a diverse task as creating an electronic healthcare infrastructure for Montana. This roadmap will balance various competing priorities by advocating a representative governance structure, and it will incorporate flexibility to adapt to lessons learned, technical advancements, and national standards

as they emerge. Dedicated commitment from multiple stakeholders is imperative as the process of implementation is incremental, long, and difficult. With persistence and diligence, Montana can achieve electronic healthcare connectivity.

Private Sector Support

Currently we have the following signed pledges of support for the Montana HIT Task Force mission and vision:

- St. Peter's Hospital
- HIEM (Health Information Exchange of Montana)
- St. Patrick Hospital & Health Sciences Center
- Mountain-Pacific Quality Health
- Great Falls Clinic
- Northern Rockies Medical Center
- Monida Healthcare Network
- New West Health Services
- Western Montana Clinic
- Yellowstone City-County Health Department
- St. Vincent Healthcare
- Rocky Mountain Health Network
- BC/BS
- Community Hospital of Anaconda
- Mount Powell Medical Society
- EBMS

Financial Commitments

- St. Vincent Healthcare - $10,000
- Rocky Mountain Health Network - $10,000
- BC/BS - $20,000
- Community Hospital of Anaconda - $1,000
- Mount Powell Medical Society - $500

For a total of: $41, 500.00

Stakeholders

BC/BS - Blue Cross/Blue Shield
Benefis Healthcare
Big Horn Hospital Association
Billings Clinic
Community Hospital of Anaconda
Community Medical Center of Missoula
DPHHS - Department of Public Health and Human Services

Glacier Community Health Center
Great Falls Clinic
InfoMine of the Rockies, Inc.
Ingenium Data Technics, Inc.
Kalispell Regional Medical Center
Marcus Daly Memorial Hospital
MHA - Montana Hospital Association
MHREF - Montana Health Research and Education Foundation
MMA - Montana Medical Association
Monida Healthcare Network
Montana Mental Health
Montana Office of Rural Health and Montana Area Health Education Center
Montana State Auditor's Office
Mountain-Pacific Quality Health
MPCA - Montana Primary Care Association
MT Tech – Health Care Informatics Degree Program
MT Tech – National Center for Health Care Informatics
New West Health Services
North Valley Hospital
Northcentral Montana Healthcare Alliance
Northern Montana Hospital
Northern Rockies Medical Center
Northwest EHR Collaborative, Inc.
Office of U.S. Senator Max Baucus
Rocky Mountain Health Network
Statewide Healthcare Coalition
St. John's Lutheran Hospital
St. Luke Community Healthcare
St. Patrick Hospital & Health Sciences Center
St. Peter's Hospital
St. Vincent Healthcare
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Yellowstone City-County Health Department